

**HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, HONOLULU, HAWAII 96813

or P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: (808) 587-0460 FAX: (808) 587-0470

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STATE OF HAWAII
STATE ETHICS COMMISSION

NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST				
NAME (Last)		(First)	(Middle)	TELEPHONE
Clay		Murray		808-544-8960
MAILING ADDRESS (Street)				FAX 808-544-8961
737 Bishop Street, Suite 2350, Pacific Guardian Center, Mauka Tower				EMAIL mclay@uluponoinitiative.com
(City)		(State)		(Zip Code)
Honolulu		Hawaii		96813
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)				TELEPHONE
MAILING ADDRESS (Street)				FAX
				EMAIL
(City)		(State)		(Zip Code)

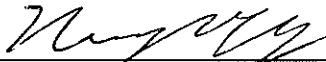
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Ulupono Initiative			808-544-8960
MAILING ADDRESS (Street)			FAX 808-544-8961
737 Bishop Street, Suite 2350, Pacific Guardian Center, Mauka Tower			EMAIL
(City)		(State)	(Zip Code)
Honolulu		Hawaii	96813
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Murray Clay			808-544-8960
MAILING ADDRESS (Street)			FAX 808-544-8961
737 Bishop Street, Suite 2350, Pacific Guardian Center, Mauka Tower			EMAIL
(City)		(State)	(Zip Code)
Honolulu		Hawaii	96813

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|--|---|--|
| <input checked="" type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input checked="" type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input checked="" type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

1/16/2013

(Date)

PART V AUTHORIZATION TO LOBBY

NAME

Murray Clay

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

Managing Partner

NAME OF ORGANIZATION (if applicable)

Uluono Initiative

TELEPHONE

808-544-8960

MAILING ADDRESS (Street)

737 Bishop Street, Suite 2350, Pacific Guardian Center, Mauka Tower

FAX 808-544-8961

EMAIL

mclay@uluonoinitiative.com

(City)

Honolulu

(State)

Hawaii

(Zip Code)

96813

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

1/16/2013

(Date)